Civil Action No.1:21-cv-09966-JMF

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (name of	of individual and title, if any)	RAE WELLNESS PBC			
vas re	ceived by me on (date)	12/17/21	·			
	☐ I personally served th	e summons on the indivi	dual at (place)			
			on (date)		; or	
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who resides there,					
	on (date)	, and mailed a copy to the individual's last known address; or				
	I served the summons on (name of individual) Lisa Rhodes				, who is	
	designated by law to accept service of process on behalf of (name of organization) RAE WELLNESS PBC					
	c/o Capitol Services, Inc.,			12/20/21	; or	
	☐ I returned the summons unexecuted because				; or	
	☐ Other (specify):					
	My fees are \$	for travel and \$	for servi	ices, for a total of \$	0.00	
	I declare under penalty of	of perjury that this inforn	nation is true.			
			M/M	P		
Date:	12/20/21	_	Ser	ver's signature		
			Robert DeLacy, Process Server			
		Approximate	Printed name and title			
			D. M. Professional Services			
				erside Rd, Ste 72 gton, DE 19809		
			Sei	rver's address		

Additional information regarding attempted service, etc: